

#### **GRANT** **REPORT FORM**

THIS IS A FINAL REPORT \_\_\_\_\_ THIS IS AN INTERIM REPORT \_\_\_\_\_

**Name of Fund/Grant Program that Issued Your Grant** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Date Awarded** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Organization** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**Date of Report**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Contact Name** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**Title** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Phone** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **Email** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Address** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**1. Total Grant Awarded $\_\_\_\_\_\_\_\_\_ Date range for grant report \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**2. What were the measurable outputs of your program or project during the grant period (outputs are defined as “tangible and measurable deliverables from the project,” ie, the number of people that received a service, the number of services provided, etc). If you submitted an application for this grant, restate the proposed outputs in your grant application, then provide the actual outputs produced during the grant period. If your outputs were lower than proposed in your application, please provide an explanation.**

**3. What were the measurable outcomes of your program or project during the grant period (outcomes are defined as “measurable changes in behavior, attitudes, perceptions, knowledge, skills, and/or conditions as a result of your project,” ie the percent of people served who have now changed as a result of your program, the percent decrease in a problematic condition, etc). If you submitted an application for this grant, restate the proposed outcomes in your grant application, then provide the actual outcomes measured and achieved during the grant period. If you did not meet the outcomes proposed in your application, please provide an explanation.**

**4. Summarize the program’s accomplishments during the grant period.**

**5. Describe any unexpected problems or obstacles to completing your project or achieving your outcomes during the grant period. How did you address those obstacles? What were the “lessons learned?”**

**6. Provide a specific story that highlights the impact of your grant funded program (please do not provide a general story about the overall program; rather, please provide an actual story of someone helped by your services, or a story that demonstrates a specific change in the community, etc.)**

**7. BUDGET. Provide a brief summary of your actual expenses during the grant period. Provide an explanation for any line item with a variance of 10% or more between your budgeted and actual expenses (using budgeted expenses provided in your original grant application) in the budget report form below.**

**Grant Report Budget Form**

**Organization Name** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **Date** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Use this area to report your program income and expenses

|  |  |  |
| --- | --- | --- |
|  **Expense Items** | Budgeted | Actual |
| Describe: |   |   |
| Describe: |   |   |
| Describe: |   |   |
| Describe: |   |   |
| Describe: |   |   |
| *Total Expenses* |  $  |  $  |

|  |  |  |
| --- | --- | --- |
|  **Income Sources** | Budgeted | Actual |
| Describe: |   |   |
| Describe: |   |   |
| Describe: |   |   |
| CFLNFC Grant Received |   |   |
| *Total Income* |  $  |  $  |